

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

17

Application Number

10/800,992

Filing Date

March 15, 2004

First Named Inventor

Beck

Group Art Unit

1614

Examiner Name

Jagoe, Donna A.

Attorney Docket Number

D-2804CON2

ENCLOSURES (check all that apply)

☒ Fee Transmittal Form (1 page)

☒ Fee Attached (Check)

☒ Amendment/Reply (10 pages)

☐ After Final

☐ Affidavits/declaration(s)

☒ Extension of Time Request
(1 page)

☐ Express Abandonment
Request

☐ Information Disclosure
Statement

☐ Certified Copy of Priority
Document(s)

☐ Response to Missing Parts/
Incomplete Application

☐ Response to Missing
Parts under 37 CFR
1.52 or 1.53

☐ Drawing(s)

☐ Licensing-related Papers

☐ Petition

☐ Petition to Convert to a
Provisional Application

☐ Power of Attorney,
Revocation
Change of Correspondence
Address

☐ Terminal Disclaimer

☐ Request for Refund

☐ CD, Number of
CD(s) _____

☐ Landscape Table on CD

☐ After Allowance Communication
to TC

☐ Appeal Communication to Board of Appeals
and Interferences

☐ Appeal Communication to TC
(Appeal Notice, Brief, Reply Brief)

☐ Proprietary Information

☐ Status Letter

☒ Other Enclosure(s)
(please identify below)

- Declaration Under 37 CFR 1.132
(4 pages)

- Return Receipt Postcard

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name

Stout, Uxa, Buyan & Mullins, LLP

Signature

Printed Name

Carlos A. Fisher

Date

September 30, 2008

Reg. No.

36,510

CERTIFICATE OF TRANSMISSION/MAILING

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Signature

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JANET MCGHEE

Date

September 30, 2008

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Fees Pursuant to the Consolidated Appropriations Act 2005 (H.R. 4818).				Complete if Known				
<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">For FY 2008</h2> <p style="font-size: x-small; margin: 0;">Patent fees are subject to annual revision.</p>				Application Number	10/800,992			
				Filing Date	March 15, 2004			
				First Named Inventor	Beck			
				Examiner Name	Jagoe, Donna A.			
				Art Unit	1614			
				Attorney Docket No.	D-2804CON2			
<input type="checkbox"/> Application claims small entity status. See 37 CFR 1.27								
TOTAL AMOUNT OF PAYMENT		(\$)		120.00				
METHOD OF PAYMENT (check all that apply)								
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____								
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number <u>21-0890</u> Deposit Account Name <u>Frank J. Uxa</u>								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
<input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee								
<input checked="" type="checkbox"/> Charge any additional fee(s) associated with this communication <input checked="" type="checkbox"/> Credit any overpayments								
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.								
FEE CALCULATION								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
		FILING FEES		SEARCH FEES		EXAMINATION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)	
Utility	310	155	510	255	210	105	_____	
Design	210	105	100	50	130	65	_____	
Plant	210	105	310	155	160	80	_____	
Reissue	310	155	510	255	620	310	_____	
Provisional	210	105	0	0	0	0	_____	
Subtotal (1)							0	
2. EXCESS CLAIM FEES								
Fee Description						Small Entity Fee (\$)	Fee (\$)	
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent						50	25	
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent						210	105	
Multiple Dependent Claims						370	185	
Total Claims Extra Claims Fee (\$) Fee Paid (\$)						Multiple Dependent Claims		
-20 or HP = _____ x _____						Fee (\$)	Fee Paid (\$)	
HP = highest number of total claims paid for, if greater than 20								
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)								
-3 or HP = _____ x _____								
HP = highest number of independent claims paid for, if greater than 3								
Subtotal (2)							0	
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets		Extra Sheets		Number of each additional 50 or fraction thereof		Fee (\$)		Fee Paid (\$)
-100 = _____		/50= _____		(round up to a whole number)		x _____ = _____		
Subtotal (3)							0	
4. OTHER FEE(S)						Fee Paid (\$)		
<input type="checkbox"/> Surcharge - Late filing fee or oath/declaration: \$130 fee (\$65 small entity discount)								
<input type="checkbox"/> Non-English Specification: \$130 fee (no small entity discount)								
<input checked="" type="checkbox"/> 1-month extension of time: \$120 fee (\$60 small entity discount)						120.00		
<input type="checkbox"/> 2-month extension of time: \$460 fee (\$230 small entity discount)								
<input type="checkbox"/> 3-month extension of time: \$1050 fee (\$525 small entity discount)								
<input type="checkbox"/> 4-month extension of time: \$1640 fee (\$820 small entity discount)								
<input type="checkbox"/> 5-month extension of time: \$2230 fee (\$1115 small entity discount)								
<input type="checkbox"/> Information Disclosure Statement Fee: \$180 fee (no small entity discount)								
<input type="checkbox"/> Notice of Appeal: \$510 fee (\$255 small entity discount)								
<input type="checkbox"/> Filing a Brief in Support of Appeal: \$510 fee (\$255 small entity discount)								
<input type="checkbox"/> Request for Oral Hearing: \$1030 fee (\$515 small entity discount)								
<input type="checkbox"/> Utility Issue Fee: \$1440 fee (\$720 small entity discount)								
<input type="checkbox"/> Recording each patent assignment per property (times number of properties): \$40 fee (no small entity fee discount)								
<input type="checkbox"/> Request for Continued Examination: \$810 fee (\$405 small entity discount)								
<input type="checkbox"/> Other: _____								
Subtotal (4)							120.00	
SUBMITTED BY								
Name (Print/Type)		Carlos A. Fisher		Registration No. (Attorney/Agent)		36,510		Telephone 949-450-1750
Signature						Date		September 30, 2008